

VASCULAR SURGERY

PAPER-II

Time: 3 hours
Max. Marks: 100

VS/D/19/33/II

Important Instructions:

- Attempt all questions in order.
- Each question carries 10 marks.
- Read the question carefully and answer to the point neatly and legibly.
- Do not leave any blank pages between two answers.
- Indicate the question number correctly for the answer in the margin space.
- Answer all the parts of a single question together.
- Start the answer to a question on a fresh page or leave adequate space between two answers.
- Draw table/diagrams/flowcharts wherever appropriate.

Write short notes on:

- Define abdominal angina. 2+3+4+1
 - Mesenteric collateral circulation.
 - Indication and methods of intervention in mesenteric artery occlusion.
 - Follow up protocol for mesenteric revascularization.
- Discuss causes of gangrene in multiple fingers in end stage renal disease (stage 5) on dialysis with autologous arteriovenous fistulae. 3+3+4
 - How to manage this patient with venous hypertension?
 - How to manage distal ischemia in long duration functioning AV(arteriovenous) fistulae?
- What are stents? 1+(2+3+2+2)
 - Discuss about bare metal stent, Biomimetic metal stent, Drug coated stent, and Bio-reabsorbable scaffolds.
- What are carotid body tumors? 2+2+1+2+3
 - Shamblin staging of carotid body tumours.
 - Uses of pre-operative embolization.
 - Complications of surgical intervention.
 - How to approach a patient with bilateral carotid body tumours?
- Define deep venous thrombosis (DVT). 2+2+2+2+2
 - Mechanism of development of DVT.
 - Management of DVT.
 - Complications of DVT.
 - Advantages of endovascular intervention in DVT.

P.T.O.

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6. a) How to approach a patient with type 3 Aorta iliac occlusion disease? 2+3+3+2
b) Types of Dacron graft used previously and recently.
c) How will you assess the need for sequential bypass in type 3 Aorta iliac occlusion disease?
d) How to assess usefulness of Profundoplasty preoperatively?
7. Discuss different types of vascular conduit in vascular surgery. 10
8. a) Thoracoabdominal aneurysm classification. 5+5
b) Visceral and spinal protection protocol.
9. a) Post revascularization follow up protocol. 3+2+5
b) In-situ stent stenosis/occlusion intervention in symptomatic patient.
c) Graft occlusion management.
10. a) Various classification of diabetic foot syndromes. 2+2+3+3
b) Wlfl classification.
c) Management of ischemia diabetic foot.
d) Advantages and disadvantages drug coated balloons.
